Case 07-72904 Doc 1 Filed 11/29/07 Entered 11/29/07 17:10:56 Desc Main

11/29/07 5:00PM

Page 1 of 54 Document Official Form 1 (4/07) **United States Bankruptcy Court Voluntary Petition Northern District of Illinois** Name of Debtor (if individual, enter Last, First, Middle): Name of Joint Debtor (Spouse) (Last, First, Middle): Thibedeau, John E. Thibedeau, Angela M. All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Last four digits of Soc. Sec./Complete EIN or other Tax ID No. (if more than one, state all) Last four digits of Soc. Sec./Complete EIN or other Tax ID No. (if more than one, state all) xxx-xx-1785 xxx-xx-6042 Street Address of Debtor (No. and Street, City, and State): Street Address of Joint Debtor (No. and Street, City, and State): 804 N. Rockton Ave. 804 N. Rockton Ave. Rockford, IL Rockford, IL ZIP Code ZIP Code 61103 61103 County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business: Winnebago Winnebago Mailing Address of Debtor (if different from street address): Mailing Address of Joint Debtor (if different from street address): ZIP Code ZIP Code Location of Principal Assets of Business Debtor (if different from street address above): Type of Debtor Nature of Business Chapter of Bankruptcy Code Under Which (Form of Organization) (Check one box) the Petition is Filed (Check one box) (Check one box) ☐ Health Care Business Chapter 7 Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) ☐ Chapter 15 Petition for Recognition ☐ Chapter 9 Individual (includes Joint Debtors) of a Foreign Main Proceeding ☐ Chapter 11 See Exhibit D on page 2 of this form. □ Railroad ☐ Chapter 15 Petition for Recognition ☐ Chapter 12 □ Stockbroker ☐ Corporation (includes LLC and LLP) of a Foreign Nonmain Proceeding ☐ Chapter 13 Commodity Broker ☐ Partnership ☐ Clearing Bank Other (If debtor is not one of the above entities, ☐ Other Nature of Debts check this box and state type of entity below.) **Tax-Exempt Entity** Debts are primarily consumer debts, ☐ Debts are primarily (Check box, if applicable) defined in 11 U.S.C. § 101(8) as business debts. ☐ Debtor is a tax-exempt organization under Title 26 of the United States "incurred by an individual primarily for Code (the Internal Revenue Code). a personal, family, or household purpose.' Chapter 11 Debtors Filing Fee (Check one box) Check one box: Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Full Filing Fee attached Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). \square Filing Fee to be paid in installments (applicable to individuals only). Must Check if: attach signed application for the court's consideration certifying that the debtor Debtor's aggregate noncontingent liquidated debts (excluding debts owed is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A to insiders or affiliates) are less than \$2,190,000. ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must Check all applicable boxes: attach signed application for the court's consideration. See Official Form 3B. A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). THIS SPACE IS FOR COURT USE ONLY Statistical/Administrative Information ☐ Debtor estimates that funds will be available for distribution to unsecured creditors. Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. Estimated Number of Creditors OVER 200-1.000-5 001-10 001-25 001-50 001-50-100-1-49 99 199 999 5.000 10.000 25.000 50.000 100.000 100.000 Estimated Assets \$0 to □ \$10,001 to □ \$100,001 to П \$1,000,001 to ☐ More than \$10,000 \$100,000 \$1 million \$100 million \$100 million Estimated Liabilities \$100,001 to \$1,000,001 to □ \$0 to \$50,001 to More than

\$100 million

\$100 million

\$50,000

\$100,000

\$1 million

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Page 2 of 54 Document FORM B1, Page 2 Official Form 1 (4/07) Name of Debtor(s): Voluntary Petition Thibedeau, John E. Thibedeau, Angela M. (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Brian A. Hart November 29, 2007 Signature of Attorney for Debtor(s) (Date) Brian A. Hart 6211006 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? ☐ Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: **Exhibit D** also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

FORM B1, Page 3

Official Form 1 (4/07)

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

Thibedeau, John E.

Thibedeau, Angela M.

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ John E. Thibedeau

Signature of Debtor John E. Thibedeau

X /s/ Angela M. Thibedeau

Signature of Joint Debtor Angela M. Thibedeau

Telephone Number (If not represented by attorney)

November 29, 2007

Date

Signature of Attorney

X /s/ Brian A. Hart

Signature of Attorney for Debtor(s)

Brian A. Hart 6211006

Printed Name of Attorney for Debtor(s)

Brian A. Hart Law Offices, P.C.

Firm Name

308 W. State Street Suite M8 Rockford, IL 61101

Address

815-964-4278 Fax: 815-964-4280

Telephone Number

November 29, 2007

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

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Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

| In re | John E. Thibedeau Angela M. Thibedeau | | Case No. | |
|-------|--|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | - | |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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Official Form 1, Exh. D (10/06) - Cont.

| □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.] |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to |
| financial responsibilities.); |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.); |
| ☐ Active military duty in a military combat zone. |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: | /s/ John E. Thibedeau | |
|----------------------|-----------------------|--|
| | John E. Thibedeau | |

Date: November 29, 2007

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Official Form 1, Exhibit D (10/06)

United States Bankruptcy Court Northern District of Illinois

| In re | John E. Thibedeau Angela M. Thibedeau | | Case No. | |
|-------|--|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | | • |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.] ____

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

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Official Form 1, Exh. D (10/06) - Cont.

| □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.] |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of realizing and making rational decisions with respect to |
| financial responsibilities.); |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.); |
| ☐ Active military duty in a military combat zone. |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. |

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: _ | /s/ Angela M. Thibedeau | |
|------------------------|-------------------------|--|
| | Angela M. Thibedeau | |

Date: November 29, 2007

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Form 6-Summary (10/06)

United States Bankruptcy Court Northern District of Illinois

| In re | John E. Thibedeau, | | Case No. | |
|-------|---------------------|---------|-----------|---|
| | Angela M. Thibedeau | | | |
| _ | | Debtors | " Chapter | 7 |
| | | | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 0.00 | | |
| B - Personal Property | Yes | 3 | 8,750.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 6,800.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 14 | | 48,014.74 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 2,837.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 2,788.00 |
| Total Number of Sheets of ALL Schedu | ıles | 26 | | | |
| | T | otal Assets | 8,750.00 | | |
| | | | Total Liabilities | 54,814.74 | |

11/29/07 5:00PM

Official Form 6 - Statistical Summary (10/06)

United States Bankruptcy Court Northern District of Illinois

| In re | John E. Thibedeau, | | Case No. | | |
|-------|---------------------|---------|----------|---|--|
| | Angela M. Thibedeau | | | | |
| _ | | Debtors | Chapter | 7 | |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | 2,837.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 18) | 2,788.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 3,190.00 |

State the following:

| | | _ |
|--|------|-----------|
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 2,500.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 48,014.74 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 50,514.74 |

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Form B6A (10/05)

In re

John E. Thibedeau, Angela M. Thibedeau

| Case No | | |
|---------|--|--|
| | | |

11/29/07 5:00PM

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Wife, Joint, or Community

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Amount of Secured Claim

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

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Form B6B (10/05)

In re

John E. Thibedeau,

| , | | | | | |
|---|---|--|--|--|--|
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| Case No. | | |
|----------|--|--|
| | | |

Angela M. Thibedeau

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|-----|--|------------------|---|---|--|
| 1. | Cash on hand | X | | | |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, | Chec Bank | king & savings account with National City | J | 100.00 |
| | thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | Custo | odial Savings account with US Bank | J | 50.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| 4. | Household goods and furnishings, | Misc. | household goods and furnishings | J | 2,000.00 |
| | including audio, video, and computer equipment. | Refri | gerator | J | 500.00 |
| | | Violin | 1 | J | 400.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. | Wearing apparel. | Cloth | ing | J | 450.00 |
| 7. | Furs and jewelry. | Wedo | ling ring | J | 1,000.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Х | | | |
| 10. | Annuities. Itemize and name each issuer. | X | | | |
| | | | | | |
| | | | | Sub-Tota | al > 4,500.00 |

2 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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Form B6B (10/05)

In re

John E. Thibedeau, Angela M. Thibedeau

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--------------------------------------|---|---|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | Х | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. Accounts receivable. | X | | | |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars | | | | |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | x | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| | | | Sub-Total of this page) | al > 0.00 |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

Form B6B (10/05)

In re John E. Thibedeau,
Angela M. Thibedeau

11/29/07 5:00PM

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | x | | | |
| 25. | Automobiles, trucks, trailers, and | 1990 | Dodge Dakota | J | 750.00 |
| | other vehicles and accessories. | | Ford Taurus | J | 3,500.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | X | | | |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > (Total of this page)

4,250.00

Total >

8,750.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

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Form B6C (4/07)

In re

| John E. Thibedeau, | Case No. |
|---------------------|----------|
| Angela M. Thibedeau | |

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

Check if debtor claims a homestead exemption that exceeds \$136,875.

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|--|---|----------------------------------|---|
| Checking, Savings, or Other Financial Accounts, C Checking & savings account with National City Bank | ertificates of Deposit 735 ILCS 5/12-1001(b) | 100.00 | 100.00 |
| Custodial Savings account with US Bank | 735 ILCS 5/12-1001(b) | 50.00 | 50.00 |
| Household Goods and Furnishings Misc. household goods and furnishings | 735 ILCS 5/12-1001(b) | 2,000.00 | 2,000.00 |
| Violin | 735 ILCS 5/12-1001(b) | 100.00 | 400.00 |
| Wearing Apparel Clothing | 735 ILCS 5/12-1001(a) | 450.00 | 450.00 |
| Furs and Jewelry Wedding ring | 735 ILCS 5/12-1001(b) | 1,000.00 | 1,000.00 |
| Automobiles, Trucks, Trailers, and Other Vehicles 1990 Dodge Dakota | 735 ILCS 5/12-1001(c) | 750.00 | 750.00 |

Total: 4,450.00 4,750.00

11/29/07 5:00PM

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Official Form 6D (10/06)

In re

John E. Thibedeau, Angela M. Thibedeau

11/29/07 5:00PM

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P.

name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | СОПШВНОК | Hu H W J C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | T I N G | DZLLQULDA | D I O P O F E D | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|------------------------|--|------------------|------------|-----------------|--|---------------------------------|
| Account No. | | | Rent to own | Ţ | DATED | | | |
| AARON'S RENTAL 6333 North Second Street Loves Park, IL 61111 | | J | Refrigerator | | D | | | |
| | | | Value \$ 500.00 | Ш | | | 2,000.00 | 1,500.00 |
| Account No. | | | Purchase Money Security | | | | | |
| CAL CARS 5705 North Second Street Loves Park, IL 61111 | | J | 1999 Ford Taurus | | | | | |
| | | | Value \$ 3,500.00 | 1 | | | 4,500.00 | 1,000.00 |
| Account No. | | | Rent to own | П | | | | |
| Guzzardo Music 3010 Charles Street Rockford, IL 61108 | | J | Violin | | | | | |
| A | | | Value \$ 400.00 | \vdash | | Н | 300.00 | 0.00 |
| Account No. | | | Value \$ | - | | | | |
| continuation sheets attached | | | (Total of t | Subto | | | 6,800.00 | 2,500.00 |
| | | | (Report on Summary of Sc | | ota ule | | 6,800.00 | 2,500.00 |

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Official Form 6E (4/07)

Case No. _____ In re John E. Thibedeau, Angela M. Thibedeau

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Contingent." "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled

| "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
|--|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| ☐ Domestic support obligations |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| ☐ Extensions of credit in an involuntary case |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trus or the order for relief. 11 U.S.C. § 507(a)(3). |
| ☐ Wages, salaries, and commissions |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. \$ 507(a)(4). |
| ☐ Contributions to employee benefit plans |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen |
| Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| ☐ Deposits by individuals |
| Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered provided. 11 U.S.C. § 507(a)(7). |
| ☐ Taxes and certain other debts owed to governmental units |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| ☐ Claims for death or personal injury while debtor was intoxicated |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |

continuation sheets attached

11/29/07 5:00PM

^{*} Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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Official Form 6F (10/06)

| In re | John E. Thibedeau, | Case No. | |
|-------|---------------------|----------|--|
| | Angela M. Thibedeau | | |
| _ | | Debtors | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| ☐ Check this box if debtor has no creditors holding unsecu | red c | lain | ns to report on this Schedule F. | | | | | |
|---|----------|------------------------|---|-------------|------------------|-----|-----------------------|-----------------|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu H W J C | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | QU LD |] E | I S P U T | AMOUNT OF CLAIM |
| Account No. | 4 | | Collection | Ť | A T E D | | | |
| Account Recovery Services, Inc. P.O. Box 2526 Loves Park, IL 61132 | | J | | | | | | 119.00 |
| Account No. | ╁ | <u> </u> | Collection | - | ┢ | Ŧ | | 113.00 |
| Accounts Receivable Management 7507 N. Second St. Unit C Machesney Park, IL 61115-2667 | | J | | | | | | 46.00 |
| Account No. 5166659 | t | \vdash | Payday loan | \dagger | T | t | | |
| ACE Cash Express, Inc. 1231 Greenway Drive Suite 700 Irving, TX 75038 | | J | | | | | | 373.67 |
| Account No. 015701342-02 | | T | Collection for Verizon North | | T | T | | |
| AFNI, Inc. P.O. Box 3427 Bloomington, IL 61702-3427 | | J | | | | | | |
| | | | | | | | | 360.16 |
| 13 continuation sheets attached | - | | (Total of | Sub this | | | :) | 898.83 |

11/29/07 5:00PM

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No |
|-------|---------------------|---------|
| | Angela M. Thibedeau | |

| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTLXGENT | DZLLQDLDAH | DISPUTED | AMOUNT OF CLAIM |
|---|-----------------|------------------------|---|------------|------------|----------|-----------------|
| Account No. 0193364361 0001 | | | Collection for IMP | | Ė | | |
| ALLIED INTERSTATE ** % CT Corporation System 208 S. LaSalle Street, Ste 814 Chicago, IL 60604 | | J | | | | | 71.30 |
| Account No. 106205960 | | | Collection for National City | П | | | |
| ALLIED INTERSTATE ** % CT Corporation System 208 S. LaSalle Street, Ste 814 Chicago, IL 60604 | | J | | | | | |
| | | | | | | | 1,237.52 |
| Account No. 57278642 AMO Recoveries P.O Box 926200 Norcross, GA 30010-6200 | | J | Collection for US Cellular | | | | 750.98 |
| Account No. 3640024 | | | Collection for Capital One Services | | | | |
| Anchor Receivables Management P.O. Box 41003 Norfolk, VA 23541 | | J | | | | | 806.34 |
| Account No. 65566 | | | Collection for Cornerstone Clinic | П | | | |
| ATTORNEY TERRY HOSS P.O. Box 449 Cherry Valley, IL 61016 | | J | NOTICE ONLY | | | | 0.00 |
| Sheet no. 1 of 13 sheets attached to Schedule of | | | , | Subt | ota | 1 | 0.000.44 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his p | pag | e) | 2,866.14 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No. |
|-------|---------------------|----------|
| | Angela M. Thibedeau | |

Debtors

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | Ις | U | P | ·Τ | |
|--|----------|-------------|---|------------|---------------------|-----------------|----|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | RL I QU I D A T E D | D I S P U T E D | ! | AMOUNT OF CLAIM |
| Account No. 14198846 | | | Collection for The Cash Store |] T | T E | | | |
| Bennett & DeLoney P.O. Box 190 Midvale, UT 84047-0190 | | J | NOTICE ONLY | | D | | | 0.00 |
| Account No. 8535852 | | | Collection for US Cellular | T | Г | T | T | |
| BUREAU OF COLLECTION RECOVERY, INC. 7575 Corporate Way Eden Prairie, MN 55344 | | J | NOTICE ONLY | | | | | 0.00 |
| Account No. 4405-6102-6022-7961 | ╀ | ┝ | Collection for Genesis Financial | + | ⊢ | ╀ | + | 0.00 |
| Capital Mangement Services, Inc. 726 Exchange St. Suite 700 Buffalo, NY 14210 | | J | Conection for Genesis i mancial | | | | | 540.93 |
| Account No. | T | T | Collection | T | T | T | Ť | |
| CBCS P.O. BOX 69 Columbus, OH 43216 | | J | | | | | | 168.00 |
| Account No. 03-42419862 | f | \vdash | Collection for NiCor | + | \vdash | \vdash | + | |
| CBCS PO Box 163250 Columbus, OH 43216 | | J | NOTICE ONLY | | | | | 0.00 |
| Sheet no. 2 of 13 sheets attached to Schedule of | | | | Sub | tota | ıl | Ť | 708.93 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pas | ge) | 1 | 700.93 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No |
|-------|---------------------|---------|
| | Angela M. Thibedeau | |

Debtors

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | C | U | D | |
|--|----------|-------------|---|------------|----------|----------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | COZH-ZGEZH | | SPUTED | AMOUNT OF CLAIM |
| Account No. KR3492 | | | Collection for The Cash Store |] T | T E | | |
| CCB Credit Services P.O. Box 272 Springfield, IL 62705-0272 | | J | NOTICE ONLY | | D | | 0.00 |
| Account No. | | | Notice only | | | | |
| Chase* Legal Dept 131 S. Dearborn, FI 5 Chicago, IL 60603 | | J | | | | | 0.00 |
| Account No. | ╁ | - | Collection Notice only | \vdash | \vdash | \vdash | |
| Collectech Systems* PO Box 361567 Columbus, OH 43236 | | J | Conconon recinco Ciny | | | | 0.00 |
| Account No. | T | T | Collection | T | | | |
| Collection Specialists, INC PO Box 433 Platteville, WI 53818-0433 | | J | | , | | | 105.00 |
| Account No. | \vdash | \vdash | collection for Southwest Health Center | \vdash | | | |
| Collection Specialists, INC PO Box 433 Platteville, WI 53818-0433 | | J | | | | | 107.25 |
| Sheet no. 3 of 13 sheets attached to Schedule of | • | | | Subt | ota | .1 | 242.05 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | e) | 212.25 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No. |
|-------|---------------------|----------|
| | Angela M. Thibedeau | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| | | | | | | _ | |
|---|----------|---------|--|---------------|------------------|----|-----------------|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J C | IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | UNLIQUIDA | ΙĿ | AMOUNT OF CLAIM |
| Account No. | | | Deficiency Balance | Т | A T E D | | |
| CONDOR CAPITAL CORP. 800 South Oyster Bay Road Hicksville, NY 11801-3519 | | J | | | D | | 13,000.00 |
| Account No. | T | | medical | | | | |
| CORNERSTONE CLINIC P.O. Box 1658 Rockford, IL 61110-0158 | | J | | | | | |
| | | | | | | | 1,143.00 |
| Account No. F12075 Credit Management Control P.O. Box 589 Waukesha, WI 53187-0589 | | J | Collection for Walgreen | | | | 34.54 |
| Account No. Creditor's Protection Service 202 W. State Street, Suite 300 P.O. BOX 4115 Rockford, IL 61110-0615 | | J | Collection for Dr. Kenneth Lutsch NOTICE ONLY | | | | 0.00 |
| Account No. Creditors Protection SVC 202 W. State St., Suite 300 Rockford, IL 61101 | | J | Collection for Medical bills NOTICE ONLY | | | | 0.00 |
| Sheet no. <u>4</u> of <u>13</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | Subt his j | | | 14,177.54 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No. |
|-------|---------------------|----------|
| | Angela M. Thibedeau | |

Debtors

| CREDITOR'S NAME, | Č | Hu | sband, Wife, Joint, or Community | Č | Ų | D | |
|--|-------------|-------------------------------|---|------------|--------------|----------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | SPUTED | AMOUNT OF CLAIM |
| Account No. 093030078 | _ | | | Ι' | Ę | | |
| Daimler Chrysler P.O. Box 0676 Carol Stream, IL 60132-0676 | | J | | | D | | 26.90 |
| Account No. | | | Collection | | | | |
| Debt Credit Services P.O. BOX 4659 Akron, OH 44310 | | J | | | | | |
| | | | | | | | 167.00 |
| Account No. | | | Utility | | | | |
| DirecTV* P.O. Box 78626 Phoenix, AZ 85062-8626 | | J | | | | | 175.51 |
| Account No. K56981 10310059 | ┢ | ┢ | Collection for Motorola | + | \vdash | \vdash | |
| Diversified Services Group 5800 East Thomas Road Suite 107 Scottsdale, AZ 85251 | | J | | | | | 396.72 |
| Account No. | T | T | Student Ioan | | | Г | |
| EDSOUTH/EDFINANCIAL SERVICES P.O. Box 31549 Knoxville, TN 37930 | | J | | | | | 2,625.00 |
| Sheet no5 _ of _13 _ sheets attached to Schedule of | | • | | Subt | ota | .1 | |
| Creditors Holding Unsecured Nonpriority Claims | (Total of t | (Total of this page) 3,391.13 | | | | | |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No. |
|-------|---------------------|----------|
| | Angela M. Thibedeau | |

Debtors

| CREDITOR'S NAME, | Ç | Hu | sband, Wife, Joint, or Community | Ğ | Ų | D | ·Τ | |
|--|-------------|-----------------------------|---|------------|------------------|----|--------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | QULD | E |) ! | AMOUNT OF CLAIM |
| Account No. | | | Notice only | ' | A T E D | | | |
| FIVE AND DRIVE AUTO SALES, INC. 4840 North Second Street Loves Park, IL 61111 | | J | | | D | | | 0.00 |
| Account No. 387730 | T | T | Collection for United Credit Nat'l Bank | T | | T | † | |
| GENESIS FINANCIAL SOLUTIONS P.O. Box 4865 Beaverton, OR 97076-4865 | | J | NOTICE ONLY | | | | | 0.00 |
| | | | | L | L | L | ┙ | 0.00 |
| Account No. 108674 Glenwood Center 2823 Glenwood Ave Rockford, IL 61101-3542 | | J | Medical bill | | | | | 325.00 |
| Account No. | | | Medical bills | T | Г | Т | Ť | |
| HHM EMERGENCY SERVICES P.O. Box 4388 Rockford, IL 61110-0888 | | J | | | | | | 175.00 |
| Account No. | t | H | Medical bills | t | \vdash | T | † | |
| IHC Swedish American Emergency Phys P.O. Box 3261 Milwaukee, WI 53201 | • | J | | | | | | 182.00 |
| Sheet no. 6 of 13 sheets attached to Schedule of | | | | Subt | tota | al | Ť | |
| Creditors Holding Unsecured Nonpriority Claims | (Total of t | (Total of this page) 682.00 | | | | | | |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No |
|-------|---------------------|---------|
| | Angela M. Thibedeau | |

| | _ | | | | | | |
|--|----------|---------|--|---------|------------------|----|-----------------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | S | U | D | |
| AND MAILING ADDRESS | CODEBTOR | н | DATE CLAIM WAS INCURRED AND | C O N T | DZLLQU. | S | |
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER | B | W | CONSIDERATION FOR CLAIM. IF CLAIM | | Q | Ų | AMOUNT OF CLAIM |
| (See instructions above.) | Ö | c | IS SUBJECT TO SETOFF, SO STATE. | N G E N | Ĭ | ΙĿ | AMOUNT OF CLAIM |
| Account No. | ╫ | | Medical bills | Ņ | A T E D | | |
| The country of | 1 | | inicalical bine | | D | | |
| Kenneth Lutsch | | | | | | | |
| 619 Harlem Rd. | | J | | | | | |
| Machesney Park, IL 61115 | | | | | | | |
| | | | | | | | |
| | | | | | | | 416.00 |
| Account No. 60889578-10 | | | Collection for Genesis Financial | | | | |
| | 1 | | NOTICE ONLY | | | | |
| LAW OFFICES OF MITCHELL N. KAY | | ١. | | | | | |
| P.O. Box 2374 | | J | | | | | |
| Chicago, IL 60690-2374 | | | | | | | |
| | | | | | | | |
| | | | | | | | 0.00 |
| Account No. | | | collections for MCI and other misc. accounts | | | | |
| | 1 | | | | | | |
| MIDLAND CREDIT MANAGEMENT | | ١. | | | | | |
| P.O. Box 939019 | | J | | | | | |
| San Diego, CA 92193-9019 | | | | | | | |
| | | | | | | | |
| | | | | | | | 168.00 |
| Account No. | | | Collection | | | | |
| Martine I Maria a manual d | | | | | | | |
| Mutual Management 401 E. State Street | | J | | | | | |
| Rockford, IL 61104 | | ľ | | | | | |
| ROCKIOIU, IL 01104 | | | | | | | |
| | | | | | | | 100.00 |
| Account No. | ╀ | \perp | Collection | - | | | |
| Account 190. | 1 | | Conection | | | | |
| National City | | | | | | | |
| 120 W. State St. | | J | | | | | |
| Rockford, IL 61101 | | | | | | | |
| | | | | | | | |
| | | | | | | | 100.00 |
| Sheet no7 of _13_ sheets attached to Schedule of | | | S | Subt | ota | 1 | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of the | | | | 784.00 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No |
|-------|---------------------|---------|
| | Angela M. Thibedeau | |

| | _ | | | | _ | | |
|--|----------|--------|---|------------------|---------|-----|-----------------|
| CREDITOR'S NAME, | CODEBTOR | 1 | sband, Wife, Joint, or Community | C O N T | DZL_GD. | DIC | |
| AND MAILING ADDRESS INCLUDING ZIP CODE, | E | H W | DATE CLAIM WAS INCURRED AND | T | 1 | P | |
| AND ACCOUNT NUMBER | TO | C | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | Ŭ | Ť | AMOUNT OF CLAIM |
| (See instructions above.) | Ř | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | N G E N | ח | D | |
| Account No. | | | Notice only | Т | ATED | | |
| Nicor | | | | | | | |
| P.O. Box 310 | | J | | | | | |
| Aurora, IL 60507 | | | | | | | |
| | | | | | | | |
| | | | | | | | 2,400.00 |
| Account No. 7395326768 | | | Utility | | | | |
| Nicor*** | | | | | | | |
| Bk Dept | | J | | | | | |
| PO Box 549 | | | | | | | |
| Aurora, IL 60507 | | | | | | | |
| | | | | | | | 1,283.68 |
| Account No. | 1 | | medical | | | | |
| NORTHERN ILLINOIS IMAGING | | | | | | | |
| P.O. Box 1733 | | J | | | | | |
| Rockford, IL 61110 | | | | | | | |
| | | | | | | | |
| | | | | | | | 3,740.00 |
| Account No. | | | medical | | | | |
| NORTHERN ILLINOIS SCANNING* | | | | | | | |
| P.O. Box 4073 | | J | | | | | |
| Rockford, IL 61110-0573 | | | | | | | |
| | | | | | | | |
| | | | | | | | 1,310.00 |
| Account No. 6000210438 | | | Collection for IDT Carmel, Inc. | | | | |
| Oxford Management Services | | | | | | | |
| Oxford Management Services CS 9018 | | J | | | | | |
| Melville, NY 11747 | | | | | | | |
| | | | | | | | |
| | | | | | | | 977.17 |
| Sheet no. 8 of 13 sheets attached to Schedule of | | | | Subt | | | 9,710.85 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his j | pag | e) | 9,710.00 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No. |
|-------|---------------------|----------|
| | Angela M. Thibedeau | |

Debtors

| CREDITOR'S NAME, | Ç | Hu | sband, Wife, Joint, or Community | Ç | U | D | 5 | |
|--|----------|-------------|---|------------|----------|-------------|-------------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C J M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | I Q | T E D | S P U | AMOUNT OF CLAIM |
| Account No. | | | Medical bills | 1' | Ė | | | |
| Pediatrix, Obstetrix P.O. Box 102247 HW Atlanta, GA 30368-2247 | | J | | | | | | 51.00 |
| Account No. | | | Medical bills | | | Ī | | |
| PHYSICIANS IMMEDIATE CARE 3475 South Alpine Road Rockford, IL 61109 | | J | | | | | | 40.00 |
| Account No. 960246544 | ┢ | \vdash | Collection for US Cellular | + | \vdash | t | + | |
| PORTFOLIO RECOVERY P.O. Box 12914 Norfolk, VA 23541 | - | J | NOTICE ONLY | | | | | 0.00 |
| Account No. | t | | Collection | T | T | T | † | |
| Portfolio Recovery Assoc. Riverside Community Center 120 Corporate Blvd., Suite 100 Norfolk, VA 23502 | | J | | | | | | 380.00 |
| Account No. | t | | Collection | T | T | t | † | |
| RADIO SHACK P.O. Box 8189 Gray, TN 37615-8181 | | J | | | | | | 2,400.00 |
| Sheet no. 9 of 13 sheets attached to Schedule of | | | | Sub | tota | ıl | 7 | 2 874 00 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | ge) |) [| 2,871.00 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No. |
|-------|---------------------|----------|
| | Angela M. Thibedeau | |

Debtors

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | C | U | P | ·Τ | |
|---|-------------|-------------|---|------------|--------|--------------|-----------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | Q U | | 3 | AMOUNT OF CLAIM |
| Account No. | | | Medical bills | ' | Ę | | | |
| Radiologist Cons. of Rockford 6885 Vistagreen Way, #1 Rockford, IL 61107 | | J | | | В | | | 915.00 |
| Account No. | | | medical | † | T | T | T | |
| RHS ANESTHESIOLOGY SERVICE c/o PBO, Inc. 3910 North Main Street Rockford, IL 61103-1612 | - | J | | | | | | 46.00 |
| | ┡ | _ | | \perp | ot | \downarrow | 4 | 40.00 |
| Account No. 657798436 RMCB Collection Agency 2269 S. Saw Mill River Road Building 3 Elmsford, NY 10523 | | J | Collection for HomeStyle Books | | | | | 95.94 |
| Account No. 201THI532695 | | | Medical bill | T | T | T | Ť | - |
| RMH PATHOLOGISTS c/o PBO, Inc. P.O. Box 1565 Rockford, IL 61110-0065 | | J | | | | | | 72.60 |
| Account No. 173673 | ╁ | | Medical bill | + | + | + | \dagger | |
| ROCKFORD ANESTHESIOLOGISTS PO BOX 4569 Rockford, IL 61110-4569 | - | J | | | | | | 220.80 |
| Sheet no. 10 of 13 sheets attached to Schedule of | _ | | 1 | Sub | tota | ⊥ al | † | |
| Creditors Holding Unsecured Nonpriority Claims | (Total of t | | | | , [| 1,350.34 | | |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No. |
|-------|---------------------|----------|
| | Angela M. Thibedeau | |

Debtors Debtors

| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | Ç | U | D | |
|---|----------|-------------|---|------------|--------------|--------|-----------------|
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C J M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | SPUTED | AMOUNT OF CLAIM |
| Account No. | | | Medical bills | | Ė | | |
| Rockford Assoc. Pathology LTD P.O. Box 4388 Rockford, IL 61110-0888 | | J | | | D | | 282.00 |
| Account No. | | | Tuition | | | | |
| Rockford College 4050 E. State St. Rockford, IL 61108 | | J | | | | | |
| | | | | | | | 750.00 |
| Account No. Rockford Health Physicians 2300 N. Rockton Ave. Rockford, IL 61103 | | J | Medical bills | | | | 178.00 |
| Account No. ROCKFORD HEALTH SYSTEMS Rockford Memorial Hospital 2400 N. Rockton Avenue Rockford, IL 61103 | | J | medical | | | | 543.26 |
| Account No. | | | collections for and other misc. accounts | | | | |
| ROCKFORD MERCANTILE AGENCY 2502 S. Alpine Road Rockford, IL 61108 | | J | | | | | 5,782.92 |
| Sheet no. 11 of 13 sheets attached to Schedule of | | | | Sub | tota | 1 | 7.500.40 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | e) | 7,536.18 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No. |
|-------|---------------------|----------|
| | Angela M. Thibedeau | |

| | | | | | _ | | |
|---|-----------------|------------------------|---|------------------|------------|----------|-----------------|
| CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | I N G E | 771-07-D4H | DISPUTED | AMOUNT OF CLAIM |
| Account No. 0591152979-1 | | | Cellular services | | Ė | | |
| Sprint PO Box 219554 Kansas City, MO 64121 | | J | | | | | 212.59 |
| Account No. | | | Collection | Ħ | | | |
| State Collection Service 2509 Stoughton Rd. Madison, WI 53716-3314 | | J | | | | | 182.00 |
| | ┡ | | medical | \sqcup | Ш | | 102.00 |
| Account No. SWEDISH AMERICAN HOSPITAL 1400 Charles Street P.O. Box 4448 Rockford, IL 61110-0948 | - | J | medical | | | | 729.22 |
| Account No. 815-316-2360 | t | | services | Ħ | П | | |
| TDS METROCOM 525 Junction Road, Suite 6000 Madison, WI 53717-2153 | | J | | | | | 107.02 |
| Account No. 302-1026596 | T | | Payday loan | H | П | | |
| The Cash Store 1901 Gateway Drive Suite 200 Irving, TX 75038 | | J | | | | | 668.10 |
| Sheet no. 12 of 13 sheets attached to Schedule of | _ | _ | | Subte | ota | l | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his ţ | pag | e) | 1,898.93 |

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Official Form 6F (10/06) - Cont.

| In re | John E. Thibedeau, | Case No |
|-------|---------------------|---------|
| | Angela M. Thibedeau | |

Debtors

| | 1. | _ | | - | | - | |
|--|----------|-------------|---|--------------|--------------|----------|-----------------|
| CREDITOR'S NAME, | CO | Hu | sband, Wife, Joint, or Community | 10 | N | l D | |
| AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODE BTOR | C A H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| Account No. 07-987 | | | Collection for Condor Capital Corp | 1 î | Ϊ | | |
| The Chaet Kaplan Baim Law Firm 30 North LaSalle Street Suite 1520 Chicago, IL 60602 | | J | NOTICE ONLY | | D | | 0.00 |
| | _ | | | ╄ | | | 0.00 |
| Account No. 3FB26060 | ļ | | Collection for MCI Communications | | | | |
| Truelogic Financial Coporation P.O. BOX 4387 Englewood, CO 80155 | | J | | | | | |
| | | | | | | | 168.62 |
| Account No. | ✝ | ┢ | medical | + | \vdash | H | |
| UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689 | | J | | | | | |
| | | | | | | | 758.00 |
| Account No. | | | | | | | |
| | | | | | | | |
| Account No. | | | | | | | |
| | | | | | | | |
| Sheet no13_ of _13_ sheets attached to Schedule of | | | | Sub | | | 926.62 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | his | pag | ge) | 920.02 |
| | | | (Report on Summary of So | | lota Inle | | 48,014.74 |
| | | | (nepon on summary of be | | | -/ | |

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Form B6G (10/05)

In re

John E. Thibedeau, Angela M. Thibedeau Case No.

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

AARON'S RENTAL 6333 North Second Street Loves Park, IL 61111

Guzzardo Music 3010 Charles Street Rockford, IL 61108 Rent to own agreement for refrigerator

Rent to own agreement for violin.

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Form B6H (10/05)

In re

John E. Thibedeau, Angela M. Thibedeau

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Official Form 6I (10/06)

In re

| John E. Thibedeau Angela M. Thibedeau | | Case No. |
|--|-----------|----------|
| | Debtor(s) | |

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is

| | ted and a joint petition is not filed. Do not state the nam | | | | |
|-----------------------------------|---|----------------|------------|------------|-------------|
| Debtor's Marital Status: | | | | | |
| Married | RELATIONSHIP(S): | AGE(S | <i>'</i> | | |
| iviarried | Son Daughter | | 1 10 | | |
| Employment: | DEBTOR | | SPOUSE | | |
| Occupation | Laborer | Customer s | | | |
| Name of Employer | Cadbury Adams/Furst Staffing | Blockbuste | | | |
| How long employed | 6/07 | 5/07 | ' ' | | |
| Address of Employer | S/O1 | 2715 N. Ma | in St | | |
| radiess of Employer | Rockford, IL | Rockford, I | | | |
| INCOME: (Estimate of average | e or projected monthly income at time case filed) | - reorniora, i | DEBTOR | | SPOUSE |
| | | \$ | | ¢ | |
| | , and commissions (Prorate if not paid monthly) | | | \$_ | 1,764.00 |
| 2. Estimate monthly overtime | | \$ | 0.00 | \$_ | 0.00 |
| 3. SUBTOTAL | | \$ | 1,757.00 | \$_ | 1,764.00 |
| 4. LESS PAYROLL DEDUCT | IONS | | | | |
| | | \$ | 200.00 | ¢ | 206.00 |
| a. Payroll taxes and social | security | | |) - | 386.00 |
| b. Insurance | | \$ | | \$_ | 0.00 |
| c. Union dues | | \$ | | \$_ | 0.00 |
| d. Other (Specify): | | | | \$ _ | 0.00 |
| | | | 0.00 | \$_ | 0.00 |
| 5. SUBTOTAL OF PAYROLL | DEDUCTIONS | \$ | 298.00 | \$_ | 386.00 |
| 6. TOTAL NET MONTHLY T | AKE HOME PAY | \$ | 1,459.00 | \$_ | 1,378.00 |
| 7. Regular income from operati | on of business or profession or farm (Attach detailed | statement) \$ | 0.00 | \$ | 0.00 |
| 8. Income from real property | | \$ | | \$ | 0.00 |
| 9. Interest and dividends | | \$ | | \$ | 0.00 |
| | apport payments payable to the debtor for the debt | ' | | _ | |
| that of dependents listed at | | \$ | 0.00 | \$ | 0.00 |
| 11. Social security or government | | Ψ | | Ψ_ | 0.00 |
| (Specify): | ent assistance | • | 0.00 | • | 0.00 |
| (Specify). | | p | 0.00 | φ <u>_</u> | 0.00 |
| 10 P | | <u> </u> | | » — | |
| 12. Pension or retirement incom | ne | \$ | 0.00 | \$_ | 0.00 |
| 13. Other monthly income | | | | | |
| (Specify): | | | 0.00 | \$ _ | 0.00 |
| | | | 0.00 | \$_ | 0.00 |
| 14. SUBTOTAL OF LINES 7 | THROUGH 13 | \$ | 0.00 | \$_ | 0.00 |
| 15. AVERAGE MONTHLY IN | NCOME (Add amounts shown on lines 6 and 14) | \$ | 1,459.00 | \$_ | 1,378.00 |
| | MONTHLY INCOME: (Combine column totals | | | 0.00 | |
| | ebtor repeat total reported on line 15) | | \$ | 2,83 | <u>r.uu</u> |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

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Official Form 6J (10/06)

| Document | raye 34 01 34 | |
|----------|---------------|--|
| | | |
| | | |

| | John E. Thibedeau | | | |
|-------|---------------------|-----------|----------|--|
| In re | Angela M. Thibedeau | | Case No. | |
| | | Debtor(s) | | |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case

| filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. | e debioi s ia | illing at time case |
|--|---------------|---------------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Comple expenditures labeled "Spouse." | ete a separat | e schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 500.00 |
| a. Are real estate taxes included? Yes No _X_ | | |
| b. Is property insurance included? Yes No _X_ | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 250.00 |
| b. Water and sewer | \$ | 40.00 |
| c. Telephone | \$ | 50.00 |
| d. Other cable & internet | \$ | 78.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 20.00 |
| 4. Food 5. Clething | \$ \$ | 500.00 150.00 |
| 5. Clothing6. Laundry and dry cleaning | \$ \$ | 40.00 |
| 7. Medical and dental expenses | \$ | 150.00 |
| 8. Transportation (not including car payments) | \$ | 225.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 125.00 |
| 10. Charitable contributions | \$ | 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | · — | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 0.00 |
| c. Health | \$ | 0.00 |
| d. Auto | \$ | 85.00 |
| e. Other | \$ | 0.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | | |
| (Specify) | \$ | 0.00 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | 300.00 |
| b. Other | \$ | 0.00 |
| c. Other | \$ | 0.00 |
| d. Other | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 0.00 |
| 17. Other See Detailed Expense Attachment | \$ | 275.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ | 2,788.00 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | | |
| 20. STATEMENT OF MONTHLY NET INCOME | _ | |
| a. Average monthly income from Line 15 of Schedule I | \$ | 2,837.00 |
| b. Average monthly expenses from Line 18 above | \$ | 2,788.00 |
| c. Monthly net income (a. minus b.) | \$ | 49.00 |

| Case 07-72904 | Doc 1 | Filed 11/29/07 | Entered 11/29/07 17:10:56 | Desc Main | |
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| CT (40/0C) | | Document | Page 35 of 54 | | 11/29/07 5:00PM |

Official Form 6J (10/06)

John E. Thibedeau
In re Angela M. Thibedeau

Case No.

Debtor(s)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

Other Expenditures:

| School expenses | \$ 75.00 |
|--------------------------|--------------|
| Reaffirmations | \$ 100.00 |
| Auto maintenance | \$ 40.00 |
| Personal grooming | \$ 60.00 |
| Total Other Expenditures | \$ 275.00 |

Case 07-72904 Doc 1 Filed 11/29/07 Entered 11/29/07 17:10:56 Desc Main

Official Form 6-Declaration. (10/06)

Document Page 36 of 54

| Jnited | States . | Ban | krupt | tcy (| Court |
|--------|-----------|-------|----------|-------|-------|
| No | orthern D | istri | ct of Il | linoi | is |

| | John E. Thibedeau | | | |
|-------|---------------------|-----------|----------|---|
| In re | Angela M. Thibedeau | | Case No. | |
| | | Debtor(s) | Chapter | 7 |
| | | | - | |

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets [total shown on summary page plus 2], and that they are true and correct to the best of my knowledge, information, and belief.

| Date | November 29, 2007 | Signature | /s/ John E. Thibedeau |
|------|-------------------|-----------|-----------------------------------|
| | | | John E. Thibedeau |
| | | | Debtor |
| Date | November 29, 2007 | Signature | /s/ Angela M. Thibedeau |
| | | C | Angela M. Thibedeau Joint Debtor |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 07-72904 Doc 1 Filed 11/29/07 Entered 11/29/07 17:10:56 Desc Main Document Page 37 of 54

Official Form 7 (04/07)

United States Bankruptcy Court Northern District of Illinois

| In re | John E. Thibedeau Angela M. Thibedeau | | | |
|-------|--|-----------|---------|---|
| | | Debtor(s) | Chapter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None \square

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$66,500.00 2005 Employment income
\$43,750.00 2006 Employment income
\$8,800.00 2007 Employment income YTD

2

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$25,200.00 2006 Pension distribution (May 2006) \$2,700.00 2006 Unemployment (Apr-May 2006)

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL OF CREDITOR **PAYMENTS** AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> AMOUNT DATES OF PAID OR PAYMENTS/ VALUE OF AMOUNT STILL **TRANSFERS** TRANSFERS **OWING**

NAME AND ADDRESS OF CREDITOR

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND

AMOUNT STILL

RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY STATUS OR NATURE OF PROCEEDING AND CASE NUMBER AND LOCATION DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

DESCRIPTION AND VALUE OF **PROPERTY**

BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE Document Page 39 of 54

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER CONDOR CAPITAL CORP. 800 South Ovster Bay Road Hicksville, NY 11801-3519

DATE OF REPOSSESSION. FORECLOSURE SALE. TRANSFER OR RETURN 4/06

DESCRIPTION AND VALUE OF **PROPERTY** 2005 Chevy Malibu est. fmv \$14,000.

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION NAME AND ADDRESS OF CUSTODIAN

OF COURT CASE TITLE & NUMBER DATE OF ORDER

DESCRIPTION AND VALUE OF

3

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE **Brian A. Hart Law Offices** 308 W. State St. Suite M-8 Rockford, IL 61101

DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 2007

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$700 plus filing fee.

4

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

Document Page 41 of 54

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF **PROPERTY**

LOCATION OF PROPERTY

5

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 2303 Canary Dr. Apt 12 Rockford, IL 61103 NAME USED same

DATES OF OCCUPANCY

6/00 - 6/04

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT

NOTICE

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

SITE NAME AND ADDRESS

GOVERNMENTAL UNIT

NOTICE

LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

Page 42 of 54

6

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER

I.D. NO. **ADDRESS**

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME **ADDRESS**

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | November 29, 2007 | Signature | /s/ John E. Thibedeau |
|------|-------------------|-----------|-------------------------|
| | | | John E. Thibedeau |
| | | | Debtor |
| | | | |
| Date | November 29, 2007 | Signature | /s/ Angela M. Thibedeau |
| | | | Angela M. Thibedeau |
| | | | Joint Debtor |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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Form 8 (10/05)

United States Bankruptcy Court Northern District of Illinois

| John E. Thibedeau In re Angela M. Thibedeau | | | Case No. | | | |
|--|---|--|-------------------------------------|---|--|--|
| | Debto | or(s) | Chapter | 7 | | |
| CHAPTER | 7 INDIVIDUAL DEBTOR'S | STATEME | NT OF INT | ENTION | | |
| | s and liabilities which includes debts secu | | | | | |
| I have filed a schedule of execu | utory contracts and unexpired leases which | th includes persona | al property subje | ect to an unexpire | ed lease. | |
| I intend to do the following wi | intend to do the following with respect to property of the estate which secures those debts or is subject to a lease: | | | | | |
| Description of Secured Property | Creditor's Name | | Property is claimed as exempt | Property will be redeemed pursuant to 11 U.S.C. § 722 | Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c) | |
| Notice only | FIVE AND DRIVE AUTO SALES, INC. | X | us onempt | 11 015101 3 722 | 11 0.5.0. 3 02.1(0) | |
| 1999 Ford Taurus | CAL CARS | | | | х | |
| Description of Leased Property -NONE- | Lessor's Name | Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A) | | | | |
| Date November 29, 2007 | | ohn E. Thibedean n E. Thibedeau tor | au | | | |
| Date November 29, 2007 | | ngela M. Thibedea ela M. Thibedea | | | | |

Joint Debtor

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United States Bankruptcy Court
Northern District of Illinois

| In | John E. Thibedeau re Angela M. Thibedeau | Case No. | |
|------------|---|---|--------------------------------------|
| | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENSATION OF ATTORNI | EY FOR DE | EBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy. | agreed to be pai | d to me, for services rendered or to |
| | For legal services, I have agreed to accept | \$ | 700.00 |
| | Prior to the filing of this statement I have received | \$ | 700.00 |
| | Balance Due | \$ | 0.00 |
| 2. | The source of the compensation paid to me was: | | |
| | ■ Debtor □ Other (specify): | | |
| 3. | The source of compensation to be paid to me is: | | |
| | ■ Debtor □ Other (specify): | | |
| 4. | ■ I have not agreed to share the above-disclosed compensation with any other person unle | ess they are mem | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation with a person or persons who a copy of the agreement, together with a list of the names of the people sharing in the compensation. | | |
| 5. | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of ta. Analysis of the debtor's financial situation, and rendering advice to the debtor in determib. Preparation and filing of any petition, schedules, statement of affairs and plan which may c. Representation of the debtor at the meeting of creditors and confirmation hearing, and ard. Representation of the debtor in adversary proceedings and other contested bankruptcy me. [Other provisions as needed] | ning whether to y be required; ny adjourned hea | file a petition in bankruptcy; |
| 5 . | By agreement with the debtor(s), the above-disclosed fee does not include the following servers | vice: | |
| | CERTIFICATION | | |
| this | I certify that the foregoing is a complete statement of any agreement or arrangement for pays bankruptcy proceeding. | ment to me for re | epresentation of the debtor(s) in |
| Dat | ted: November 29, 2007 /s/ Brian A. Hart Brian A. Hart 621100 | 6 | |

Brian A. Hart Law Offices, P.C.

815-964-4278 Fax: 815-964-4280

308 W. State Street

Rockford, IL 61101

Suite M8

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

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B 201 (04/09/06)

11/29/07 5:00PM

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| Brian A. Hart 6211006 | X /s/ Brian A. Hart | November 29, 2007 | | | | |
|--|------------------------------------|-------------------|--|--|--|--|
| Printed Name of Attorney | Signature of Attorney | Date | | | | |
| Address: | | | | | | |
| 308 W. State Street | | | | | | |
| Suite M8 | | | | | | |
| Rockford, IL 61101 | | | | | | |
| 815-964-4278 | | | | | | |
| Certificate of Debtor I (We), the debtor(s), affirm that I (we) have received and read this notice. John E. Thibedeau | | | | | | |
| Angela M. Thibedeau | X /s/ John E. Thibedeau | November 29, 2007 | | | | |
| Printed Name of Debtor | Signature of Debtor | Date | | | | |
| Case No. (if known) | X /s/ Angela M. Thibedeau | November 29, 2007 | | | | |
| | Signature of Joint Debtor (if any) | Date | | | | |

United States Bankruptcy Court Northern District of Illinois

| In re | John E. Thibedeau Angela M. Thibedeau | | Case No. | |
|-------|--|---|-------------------------------|---------------|
| | | Debtor(s) | Chapter 7 | |
| | VER | RIFICATION OF CREDITOR M | IATRIX | |
| | | Number of | Creditors: | 68 |
| | The above-named Debtor(s) h (our) knowledge. | nereby verifies that the list of credi | tors is true and correct to t | he best of my |
| Date: | November 29, 2007 | /s/ John E. Thibedeau John E. Thibedeau Signature of Debtor | | |
| Date: | November 29, 2007 | /s/ Angela M. Thibedeau Angela M. Thibedeau | | |

Signature of Debtor

AARON'S RENTAL 6333 North Second Street Loves Park, IL 61111

Account Recovery Services, Inc. P.O. Box 2526 Loves Park, IL 61132

Accounts Receivable Management 7507 N. Second St. Unit C Machesney Park, IL 61115-2667

ACE Cash Express, Inc. 1231 Greenway Drive Suite 700 Irving, TX 75038

AFNI, Inc. P.O. Box 3427 Bloomington, IL 61702-3427

ALLIED INTERSTATE **
% CT Corporation System
208 S. LaSalle Street, Ste 814
Chicago, IL 60604

AMO Recoveries P.O Box 926200 Norcross, GA 30010-6200

Anchor Receivables Management P.O. Box 41003 Norfolk, VA 23541

ATTORNEY TERRY HOSS P.O. Box 449 Cherry Valley, IL 61016

Bennett & DeLoney P.O. Box 190 Midvale, UT 84047-0190

BUREAU OF COLLECTION RECOVERY, INC. 7575 Corporate Way Eden Prairie, MN 55344

CAL CARS 5705 North Second Street Loves Park, IL 61111

Capital Mangement Services, Inc. 726 Exchange St. Suite 700 Buffalo, NY 14210

CBCS P.O. BOX 69 Columbus, OH 43216

CBCS PO Box 163250 Columbus, OH 43216

CCB Credit Services P.O. Box 272 Springfield, IL 62705-0272

Chase*
Legal Dept
131 S. Dearborn, Fl 5
Chicago, IL 60603

Collectech Systems* PO Box 361567 Columbus, OH 43236

Collection Specialists, INC PO Box 433 Platteville, WI 53818-0433

CONDOR CAPITAL CORP. 800 South Oyster Bay Road Hicksville, NY 11801-3519

CORNERSTONE CLINIC P.O. Box 1658 Rockford, IL 61110-0158

Credit Management Control P.O. Box 589 Waukesha, WI 53187-0589

Creditor's Protection Service 202 W. State Street, Suite 300 P.O. BOX 4115 Rockford, IL 61110-0615

Creditors Protection SVC 202 W. State St., Suite 300 Rockford, IL 61101

Daimler Chrysler P.O. Box 0676 Carol Stream, IL 60132-0676

Debt Credit Services P.O. BOX 4659 Akron, OH 44310

DirecTV*
P.O. Box 78626
Phoenix, AZ 85062-8626

Diversified Services Group 5800 East Thomas Road Suite 107 Scottsdale, AZ 85251

EDSOUTH/EDFINANCIAL SERVICES P.O. Box 31549 Knoxville, TN 37930

FIVE AND DRIVE AUTO SALES, INC. 4840 North Second Street Loves Park, IL 61111

GENESIS FINANCIAL SOLUTIONS P.O. Box 4865 Beaverton, OR 97076-4865

Glenwood Center 2823 Glenwood Ave Rockford, IL 61101-3542

Guzzardo Music 3010 Charles Street Rockford, IL 61108 HHM EMERGENCY SERVICES P.O. Box 4388 Rockford, IL 61110-0888

IHC Swedish American Emergency Phys P.O. Box 3261 Milwaukee, WI 53201

Kenneth Lutsch 619 Harlem Rd. Machesney Park, IL 61115

LAW OFFICES OF MITCHELL N. KAY P.O. Box 2374 Chicago, IL 60690-2374

MIDLAND CREDIT MANAGEMENT P.O. Box 939019 San Diego, CA 92193-9019

Mutual Management 401 E. State Street Rockford, IL 61104

National City 120 W. State St. Rockford, IL 61101

Nicor P.O. Box 310 Aurora, IL 60507

Nicor****
Bk Dept
PO Box 549
Aurora, IL 60507

NORTHERN ILLINOIS IMAGING P.O. Box 1733 Rockford, IL 61110

NORTHERN ILLINOIS SCANNING* P.O. Box 4073 Rockford, IL 61110-0573 Oxford Management Services CS 9018 Melville, NY 11747

Pediatrix, Obstetrix P.O. Box 102247 HW Atlanta, GA 30368-2247

PHYSICIANS IMMEDIATE CARE 3475 South Alpine Road Rockford, IL 61109

PORTFOLIO RECOVERY P.O. Box 12914 Norfolk, VA 23541

Portfolio Recovery Assoc. Riverside Community Center 120 Corporate Blvd., Suite 100 Norfolk, VA 23502

RADIO SHACK P.O. Box 8189 Gray, TN 37615-8181

Radiologist Cons. of Rockford 6885 Vistagreen Way, #1 Rockford, IL 61107

RHS ANESTHESIOLOGY SERVICE c/o PBO, Inc. 3910 North Main Street Rockford, IL 61103-1612

RMCB Collection Agency 2269 S. Saw Mill River Road Building 3 Elmsford, NY 10523

RMH PATHOLOGISTS c/o PBO, Inc. P.O. Box 1565 Rockford, IL 61110-0065 ROCKFORD ANESTHESIOLOGISTS PO BOX 4569 Rockford, IL 61110-4569

Rockford Assoc. Pathology LTD P.O. Box 4388 Rockford, IL 61110-0888

Rockford College 4050 E. State St. Rockford, IL 61108

Rockford Health Physicians 2300 N. Rockton Ave. Rockford, IL 61103

ROCKFORD HEALTH SYSTEMS Rockford Memorial Hospital 2400 N. Rockton Avenue Rockford, IL 61103

ROCKFORD MERCANTILE AGENCY 2502 S. Alpine Road Rockford, IL 61108

Sprint PO Box 219554 Kansas City, MO 64121

State Collection Service 2509 Stoughton Rd. Madison, WI 53716-3314

SWEDISH AMERICAN HOSPITAL 1400 Charles Street P.O. Box 4448 Rockford, IL 61110-0948

TDS METROCOM 525 Junction Road, Suite 6000 Madison, WI 53717-2153 The Cash Store 1901 Gateway Drive Suite 200 Irving, TX 75038

The Chaet Kaplan Baim Law Firm 30 North LaSalle Street Suite 1520 Chicago, IL 60602

Truelogic Financial Coporation P.O. BOX 4387 Englewood, CO 80155

UIC CLINICS P.O. Box 4689 Rockford, IL 61110-4689